	PATENT APPLICATION FEE DETERMINATION RECORD								Application or Docket Number				
	Effective October 1, 2003							10/664067					
ľ	CLAIMS AS FILED - PART I							SMALL	ENTITY		OTHE	R THAN	
lr	TOTAL CLAI	NS		<u>(m. 1)</u>	_(C	olumn 2)	7	TYPE		0		L ENTITY	
FOR			- // V	<u> </u>	-		4	RATE		4	RATE	FEE	
TOTAL CHARGEABLE CLAIMS			<del></del>	ER FILED	NU	ABER EXTRA	┨.	BASIC F	EE 385.0	0 OF	BASIC FE	E 770.00	
╟	NDEPENDENT	+''	วิกinus 20=		40	$\mathbf{I}$	X\$ 9:	864	OF	X\$18=	. –		
-	MULTIPLE DEPENDENT CLAIM PR			minus 3 =		<u> 10                                    </u>	-	X43≠	440	) OF	X86=	-	
L								+145=		OR	+290=		
	* If the difference in column 1 is less than zero, enter *0" in column 2							TOTAL	170	Оон	TOTAL	770	
	CLAIMS AS AMENDED - PART II										OTHER	THAN	
Г	<del>Ţ `</del>	(Column 1)	т	(Column 2) (Column 3)				SMALI	ENTITY	OR	SMALL		
2		REMAINING AFTER	1	NUMB	ER	PRESENT		RATE	ADDI-			ADDI-	
AMENDMENT	<u> </u>	AMENDMENT	<del> </del>	PAID F		EXTRA	11	MAIE	TIONA		RATE	TIONAL FEE	
	Total	160	Minus	- /	16	6		X\$ 9 <del>=</del>	1 /	OR	X\$18=		
AM	Independent	1 /3	Minus	/	3	1=-		X43=	1		X86=		
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						▎▐		<del>  /                                   </del>	OR	7.00-	/	
							L	+145=	1/	OR	+290=		
	•	(Cal 4)		_		•	A	TOTAL DDIT, FEE		OR,	TOTAL ADDIT, FEE		
		(Column 1) CLAIMS		(Column		(Column 3)	-						
8 <b>5</b>	· .	REMAINING AFTER		NUMBE PREVIOU		PRESENT EXTRA		RATE	ADDI- TIONAL	H	DATE	ADDI-	
Ž	Total	AMENDMENT	<u></u>	PAID FO		EATRA	<b> </b>		FEE	1 1	RATE	FEE .	
MENDMENT	Independent	1/6	Minus . Minus	-1/6		Ė	L	X\$ 9=	. /	OR	X\$18=	<i>[.</i>	
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	· · · · · · · · · · · · · · · · · · ·			CHOCKIC	771147			145=		OR	+290=	<del>/  </del>	
TOTAL										TOTAL			
	<u>*</u>	(Calumn 1)		(Column:	21	(Column 3)	. AD	DIT. FEE <b>l</b>	<u>-</u>	ION A	DDIT. FEE	· ·	
,	. •	CLAIMS REMAINING		HIGHEST			Ė		4054	_			
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İ	Independent	- <del> </del>	Minus		<del>2  </del>		L	\$ 9=	V	OR _	X\$18=	· .	
	FIRST PRESE	Ľ	43=/	$\Delta$ $\Box$	OR _	X86=							
+145													
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter 20.													
		nber Previously Paid oer Previously Paid I	FACINITUIC	: CD466 :- 1			ADD:	T/FEE L			DIT. FEE		
_	770.47E (Per 19)			,		(M118068-10		ne appro	epnate box i	n COLUM:	n 7.		